

# Work Order ID 144457

April 18, 2016 3:08:06 PM

**\*144457\***

Page 1

Item ID: D3589-041 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Latch Assembly  
 Start Date: 4/20/2016 Start Qty: 4.00 **\*4\*** Cust Item ID:  
 Required Date: 5/6/2016 Req'd Qty: 4.00 **\*4\*** Customer:  
 Reference:

Approvals: Process Plan: SLH Date: 20160418 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| Draw Nbr                       | Revision Nbr             |                      |         |        |              |               |               |                  |                |
| D3589                          | C                        |                      |         |        |              |               |               |                  |                |

100

0.00

**\*100\***

Large Fab

Memo

4.96

Large Fab

1- Form D3589-11, assemble and weld D3589-9 to D3589-11 as per dwg D3589

2- grind weld flush as per dwg D3589

3- slide (4) D3589-3 Arm Guides on D3589-1 Arm and weld D3589-13 lugs on both ends as per dwg D3589

\*\*\* ensure that the 4 ARM GUIDES are on the ARM before welding both LUGS\*\*\*

4- using DT9033 jig install parts on door and weld as per dwg D3589 QSI004

\*\*\*ensure parts fit correctly on jig\*\*\*

A/R Stainless Steel Rod Batch: 126014

4 16-04-25  
JBL

110

QC9- Inspect visual per QSI004- Fusion Welds

0.00

**\*110\***

QC

Memo

0.00

Quality Control

(4) 16-04-26 DAS  
9-89

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

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| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width:100%; border: none;"> <tr> <td style="border: none;">Skid-tube <input type="checkbox"/></td> <td style="border: none;">Cross tube <input type="checkbox"/></td> <td style="border: none;">Water Jet <input type="checkbox"/></td> <td style="border: none;">Engineering <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Machining <input type="checkbox"/></td> <td style="border: none;">Small Fab <input type="checkbox"/></td> <td style="border: none;">Prod. Eng. Coord. <input type="checkbox"/></td> <td style="border: none;">Quality <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Thermoforming <input type="checkbox"/></td> <td style="border: none;">Finishing <input type="checkbox"/></td> <td style="border: none;">Rec/Store/Packaging <input type="checkbox"/></td> <td style="border: none;">Other <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Large Fab <input type="checkbox"/></td> <td style="border: none;">Composite <input type="checkbox"/></td> <td style="border: none;">Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                   | Skid-tube <input type="checkbox"/>              | Cross tube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Cross tube <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Water Jet <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Engineering <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                 |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Small Fab <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Prod. Eng. Coord. <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Quality <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                 |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Finishing <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Rec/Store/Packaging <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Other <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                 |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Composite <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Supplier <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                 |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Date :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Step #:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | QTY Effective :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | MRB (QSI042) Approval                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                 |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                 |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                   | Lead hand / Supervisor<br>Approval Verification |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | QC / QA Coordinator<br>Approval                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                 |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Root Cause                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | FAULT CATEGORY                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                 |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Environment <input type="checkbox"/><br>Design <input type="checkbox"/><br>Doc/Data <input type="checkbox"/><br>Equip/Tooling <input type="checkbox"/><br>Handling/Pre <input type="checkbox"/><br>Material <input type="checkbox"/><br>Internal Transport <input type="checkbox"/><br>Tribal Knowledge <input type="checkbox"/><br>LOA <input type="checkbox"/><br>Substation <input type="checkbox"/><br>Past Expiry Date <input type="checkbox"/><br>Misidentified <input type="checkbox"/> | No Re-verification <input type="checkbox"/><br>Operator <input type="checkbox"/><br>Offset/Setup <input type="checkbox"/><br>Supplier <input type="checkbox"/><br>Training <input type="checkbox"/><br>Use for Testing <input type="checkbox"/><br>Poor Information <input type="checkbox"/><br>Rushing <input type="checkbox"/><br>Product Improvement <input type="checkbox"/><br>Process Improvement <input type="checkbox"/><br>Manufacturing Process <input type="checkbox"/><br>Past Due <input type="checkbox"/> | Pressure/Forced <input type="checkbox"/><br>Bending <input type="checkbox"/><br>Centre Not Concentric <input type="checkbox"/><br>Cracks <input type="checkbox"/><br>Crimp/Kink/Ripple/Wave <input type="checkbox"/><br>Cuffs <input type="checkbox"/><br>Crushing <input type="checkbox"/><br>Heat Treat <input type="checkbox"/><br>Wave/Twist in Tube <input type="checkbox"/><br>Marks/Chatter <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Temperature/Cure <input type="checkbox"/><br>Set-up <input type="checkbox"/><br>BOM/Route <input type="checkbox"/><br>Broken/Damage/Defect <input type="checkbox"/><br>Inspection Incomplete/Unqualified <input type="checkbox"/><br>Contamination <input type="checkbox"/><br>Countersink <input type="checkbox"/><br>Cut Too Short <input type="checkbox"/><br>Instructions Incomplete/Unclear <input type="checkbox"/><br>Drill Holes <input type="checkbox"/> | Power Loss/Surge <input type="checkbox"/><br>Folio/Program <input type="checkbox"/><br>Grain <input type="checkbox"/><br>Weld <input type="checkbox"/><br>Wrong Stock Pulled <input type="checkbox"/><br>Out of Sequence <input type="checkbox"/><br>Off-set <input type="checkbox"/><br>Misabeled <input type="checkbox"/><br>Fit/Function <input type="checkbox"/><br>Misaligned/off center <input type="checkbox"/> | Positioned Wrong <input type="checkbox"/><br>Outside Dimensions <input type="checkbox"/><br>Over/Under tolerance <input type="checkbox"/><br>Part Incorrect <input type="checkbox"/><br>Part Lost/Missing <input type="checkbox"/><br>Part Moved <input type="checkbox"/><br>Drawing <input type="checkbox"/><br>Finish <input type="checkbox"/><br>Misread <input type="checkbox"/><br>Turning Sequence <input type="checkbox"/> |                                                 |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| OTHER : <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                 |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |

**Work Order ID 144457**

April 18, 2016 3:08:06 PM

**\*144457\***

Page 2

Item ID: D3589-041 Accept **\*N900040100\*** Setup Start **\*NS1\***  
Revision ID: Stop **\*NS2\***  
Item Name: Latch Assembly  
Start Date: 4/20/2016 Start Qty: 4.00 **\*4\*** Cust Item ID:  
Required Date: 5/6/2016 Req'd Qty: 4.00 **\*4\*** Customer:  
Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description                      | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|-----------------------------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 120                            | QC5- Inspect part completeness to step on W/O | 0.00                 |         |        |              |               |               |                  |                |
| <b>*120*</b>                   |                                               |                      |         |        |              |               |               |                  | DAS            |
| QC                             | Memo                                          | 0.08                 |         |        |              | (4)           | 16-04-26      |                  | 9              |
| Quality Control                |                                               |                      |         |        |              |               |               |                  | 9-89           |
| 130                            |                                               | 0.00                 |         |        |              |               |               |                  |                |
| <b>*130*</b>                   |                                               |                      |         |        |              |               |               |                  |                |
| Small Fab                      | Memo                                          | 1.40                 |         |        |              | 4             | FF            |                  | APR 26 2016    |
| Small Fab                      | 1- Assemble as per dwg                        |                      |         |        |              |               |               |                  |                |
| 140                            | QC5- Inspect part completeness to step on W/O | 0.00                 |         |        |              |               |               |                  |                |
| <b>*140*</b>                   |                                               |                      |         |        |              |               |               |                  | DAS            |
| QC                             | Memo                                          | 0.08                 |         |        |              | (4)           |               |                  | 38             |
| Quality Control                |                                               |                      |         |        |              |               |               |                  | 9-89           |

APR 26 2016

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

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| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/>                                                                                                                                                                                                                                          |                                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width:100%; border: none;"> <tr> <td style="border: none;">Skid-tube <input type="checkbox"/></td> <td style="border: none;">Cross tube <input type="checkbox"/></td> <td style="border: none;">Water Jet <input type="checkbox"/></td> <td style="border: none;">Engineering <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Machining <input type="checkbox"/></td> <td style="border: none;">Small Fab <input type="checkbox"/></td> <td style="border: none;">Prod. Eng. Coord. <input type="checkbox"/></td> <td style="border: none;">Quality <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Thermoforming <input type="checkbox"/></td> <td style="border: none;">Finishing <input type="checkbox"/></td> <td style="border: none;">Rec/Store/Packaging <input type="checkbox"/></td> <td style="border: none;">Other <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Large Fab <input type="checkbox"/></td> <td style="border: none;">Composite <input type="checkbox"/></td> <td style="border: none;">Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |  |                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Skid-tube <input type="checkbox"/> | Cross tube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Cross tube <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Water Jet <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                          | Engineering <input type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Small Fab <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Prod. Eng. Coord. <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                  | Quality <input type="checkbox"/>     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Finishing <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Rec/Store/Packaging <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                | Other <input type="checkbox"/>       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Composite <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Supplier <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                           |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Date :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Step #:                                                                                                                                                                                                                                                                                                                                                                                                                     |                                      | QTY Effective :                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                         | MRB (QSI042) Approval |                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                      | Disposition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                         |                       | Completed By                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                         |                       | Lead hand / Supervisor Approval Verification                                                                                                                                                                                                                                                                                                                                                                                      |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                         |                       | QC / QA Coordinator Approval                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Root Cause                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | FAULT CATEGORY                                                                                                                                                                                                                                                                                                                                                                                                              |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| Environment <input type="checkbox"/><br>Design <input type="checkbox"/><br>Doc/Data <input type="checkbox"/><br>Equip/Tooling <input type="checkbox"/><br>Handling/Pre <input type="checkbox"/><br>Material <input type="checkbox"/><br>Internal Transport <input type="checkbox"/><br>Tribal Knowledge <input type="checkbox"/><br>LOA <input type="checkbox"/><br>Substation <input type="checkbox"/><br>Past Expiry Date <input type="checkbox"/><br>Misidentified <input type="checkbox"/> | No Re-verification <input type="checkbox"/><br>Operator <input type="checkbox"/><br>Offset/Setup <input type="checkbox"/><br>Supplier <input type="checkbox"/><br>Training <input type="checkbox"/><br>Use for Testing <input type="checkbox"/><br>Poor Information <input type="checkbox"/><br>Rushing <input type="checkbox"/><br>Product Improvement <input type="checkbox"/><br>Process Improvement <input type="checkbox"/><br>Manufacturing Process <input type="checkbox"/><br>Past Due <input type="checkbox"/> | Pressure/Forced <input type="checkbox"/><br>Bending <input type="checkbox"/><br>Centre Not Concentric <input type="checkbox"/><br>Cracks <input type="checkbox"/><br>Crimp/Kink/Ripple/Wave <input type="checkbox"/><br>Cuffs <input type="checkbox"/><br>Crushing <input type="checkbox"/><br>Heat Treat <input type="checkbox"/><br>Wave/Twist in Tube <input type="checkbox"/><br>Marks/Chatter <input type="checkbox"/> |                                      | Temperature/Cure <input type="checkbox"/><br>Set-up <input type="checkbox"/><br>BOM/Route <input type="checkbox"/><br>Broken/Damage/Defect <input type="checkbox"/><br>Inspection Incomplete/Unqualified <input type="checkbox"/><br>Contamination <input type="checkbox"/><br>Countersink <input type="checkbox"/><br>Cut Too Short <input type="checkbox"/><br>Instructions Incomplete/Unclear <input type="checkbox"/><br>Drill Holes <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | Power Loss/Surge <input type="checkbox"/><br>Folio/Program <input type="checkbox"/><br>Grain <input type="checkbox"/><br>Weld <input type="checkbox"/><br>Wrong Stock Pulled <input type="checkbox"/><br>Out of Sequence <input type="checkbox"/><br>Off-set <input type="checkbox"/><br>Mislabeled <input type="checkbox"/><br>Fit/Function <input type="checkbox"/><br>Misaligned/off center <input type="checkbox"/> |                       | Positioned Wrong <input type="checkbox"/><br>Outside Dimensions <input type="checkbox"/><br>Over/Under tolerance <input type="checkbox"/><br>Part Incorrect <input type="checkbox"/><br>Part Lost/Missing <input type="checkbox"/><br>Part Moved <input type="checkbox"/><br>Drawing <input type="checkbox"/><br>Finish <input type="checkbox"/><br>Misread <input type="checkbox"/><br>Turning Sequence <input type="checkbox"/> |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |
| OTHER : <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                             |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                    |                                     |                                    |                                      |                                    |                                    |                                            |                                  |                                        |                                    |                                              |                                |                                    |                                    |                                   |  |

**Work Order ID 144457**

April 18, 2016 3:08:06 PM

**\*144457\***

Page 3

Item ID: D3589-041

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Item Name: Latch Assembly

Stop

**\*NS2\***

Start Date: 4/20/2016 Start Qty: 4.00

**\*4\***

Cust Item ID:

Required Date: 5/6/2016 Req'd Qty: 4.00

**\*4\***

Customer:

Reference:

Approvals:

Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_

Tooling: \_\_\_\_\_

Date: \_\_\_\_\_

Run

Start

**\*NR1\***

QC: \_\_\_\_\_

Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_

Date: \_\_\_\_\_

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

150

Identify as per dwg & Stock Location: 57

0.00

**\*150\***

Packaging

Memo

0.04

Packaging

0.46  
6  
2.89

APR 26 2016

160

QC21- Final Inspection - Work Order Release

0.00

**\*160\***

QC

Memo

0.40

Quality Control

MCJ

APR 26 2016

MCJ

APR 26 2016

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                       |  |                       |  |                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------|--|-----------------------|--|-------------------------------------------------|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Suspected Unapproved <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Cross tube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                       |  |                       |  |                                                 |
| Date : _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                    | Step #: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | QTY Effective : _____ |  | MRB (QSI042) Approval |  |                                                 |
| Description Work Order Deviation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | Disposition           |  |                       |  |                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                       |  |                       |  | Completed By                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                       |  |                       |  | Lead hand / Supervisor<br>Approval Verification |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                       |  |                       |  | QC / QA Coordinator<br>Approval                 |
| <b>Root Cause</b><br><div style="display: flex; justify-content: space-between;"> <div>           Environment <input type="checkbox"/><br/>           Design <input type="checkbox"/><br/>           Doc/Data <input type="checkbox"/><br/>           Equip/Tooling <input type="checkbox"/><br/>           Handling/Pre <input type="checkbox"/><br/>           Material <input type="checkbox"/><br/>           Internal Transport <input type="checkbox"/><br/>           Tribal Knowledge <input type="checkbox"/><br/>           LOA <input type="checkbox"/><br/>           Substation <input type="checkbox"/><br/>           Past Expiry Date <input type="checkbox"/><br/>           Misidentified <input type="checkbox"/> </div> <div>           No Re-verification <input type="checkbox"/><br/>           Operator <input type="checkbox"/><br/>           Offset/Setup <input type="checkbox"/><br/>           Supplier <input type="checkbox"/><br/>           Training <input type="checkbox"/><br/>           Use for Testing <input type="checkbox"/><br/>           Poor Information <input type="checkbox"/><br/>           Rushing <input type="checkbox"/><br/>           Product Improvement <input type="checkbox"/><br/>           Process Improvement <input type="checkbox"/><br/>           Manufacturing Process <input type="checkbox"/><br/>           Past Due <input type="checkbox"/> </div> </div> |                                                                                                                                                                                    | <b>FAULT CATEGORY</b><br><div style="display: flex; justify-content: space-between;"> <div>           Pressure/Forced <input type="checkbox"/><br/>           Bending <input type="checkbox"/><br/>           Centre Not Concentric <input type="checkbox"/><br/>           Cracks <input type="checkbox"/><br/>           Crimp/Kink/Ripple/Wave <input type="checkbox"/><br/>           Cuffs <input type="checkbox"/><br/>           Crushing <input type="checkbox"/><br/>           Heat Treat <input type="checkbox"/><br/>           Wave/Twist in Tube <input type="checkbox"/><br/>           Marks/Chatter <input type="checkbox"/> </div> <div>           Temperature/Cure <input type="checkbox"/><br/>           Set-up <input type="checkbox"/><br/>           BOM/Route <input type="checkbox"/><br/>           Broken/Damage/Defect <input type="checkbox"/><br/>           Inspection Incomplete/Unqualified <input type="checkbox"/><br/>           Contamination <input type="checkbox"/><br/>           Countersink <input type="checkbox"/><br/>           Cut Too Short <input type="checkbox"/><br/>           Instructions Incomplete/Unclear <input type="checkbox"/><br/>           Drill Holes <input type="checkbox"/> </div> <div>           Power Loss/Surge <input type="checkbox"/><br/>           Folio/Program <input type="checkbox"/><br/>           Grain <input type="checkbox"/><br/>           Weld <input type="checkbox"/><br/>           Wrong Stock Pulled <input type="checkbox"/><br/>           Out of Sequence <input type="checkbox"/><br/>           Off-set <input type="checkbox"/><br/>           Mislabeled <input type="checkbox"/><br/>           Fit/Function <input type="checkbox"/><br/>           Misaligned/off center <input type="checkbox"/> </div> <div>           Positioned Wrong <input type="checkbox"/><br/>           Outside Dimensions <input type="checkbox"/><br/>           Over/Under tolerance <input type="checkbox"/><br/>           Part Incorrect <input type="checkbox"/><br/>           Part Lost/Missing <input type="checkbox"/><br/>           Part Moved <input type="checkbox"/><br/>           Drawing <input type="checkbox"/><br/>           Finish <input type="checkbox"/><br/>           Misread <input type="checkbox"/><br/>           Turning Sequence <input type="checkbox"/> </div> </div> |  |                       |  |                       |  |                                                 |
| OTHER : <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                       |  |                       |  |                                                 |

# Picklist Print

April 18, 2016 3:08:11 PM

Page 1

Work Order ID: 144457

**\*144457\***

Parent Item: D3589-041

**\*D3589-041\***

Parent Item Name: Latch Assembly

Start Date: 4/20/2016

Required Date: 5/6/2016

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP Rev:A new issue 08-06-05 DD verified by:ec IPP RevB: revise  
process as per coss DD 10.01.18 verified by:EC IPP REV:C 12.07.23 AS  
PER REV.C DD VERF:EC

| Component Item ID/<br>Item Name | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| D3589-1                         |                        | Manufactured  | No          |                     |                  | 100             | Each               | 0.0000         | 1           | 4            |               |                |        |
| <b>*D3589-1*</b>                |                        |               |             |                     |                  |                 |                    |                | <b>**</b>   |              |               |                |        |
| Arm                             |                        |               |             |                     |                  |                 |                    |                |             |              |               |                |        |
| D3589-11                        |                        | Manufactured  | No          |                     |                  | 100             | Each               | 6.0000         | 1           | 4            |               |                |        |
| <b>*D3589-11*</b>               |                        |               |             |                     |                  |                 |                    |                | <b>**</b>   |              |               |                |        |
| Fwd Guide Plate                 |                        |               |             |                     |                  |                 |                    |                |             |              |               |                |        |
|                                 |                        |               |             |                     | <u>Location</u>  | <u>Loc Qty</u>  | <u>Loc Code</u>    |                |             |              |               |                |        |
|                                 |                        |               |             |                     | WA002            | 6               |                    |                |             |              |               |                |        |
|                                 |                        |               |             |                     | 137595           | 6               |                    |                |             |              |               |                |        |
| D3589-13                        |                        | Manufactured  | No          |                     |                  | 100             | Each               | 36.0000        | 2           | 8            |               |                |        |
| <b>*D3589-13*</b>               |                        |               |             |                     |                  |                 |                    |                | <b>**</b>   |              |               |                |        |
| Lug                             |                        |               |             |                     |                  |                 |                    |                |             |              |               |                |        |
|                                 |                        |               |             |                     | <u>Location</u>  | <u>Loc Qty</u>  | <u>Loc Code</u>    |                |             |              |               |                |        |
|                                 |                        |               |             |                     | WA002            | 36              |                    |                |             |              |               |                |        |
|                                 |                        |               |             |                     | 139003           | 36              |                    |                |             |              |               |                |        |
| D3589-23                        |                        | Manufactured  | No          |                     |                  | 100             | Each               | 9.0000         | 2           | 8            |               |                |        |
| <b>*D3589-23*</b>               |                        |               |             |                     |                  |                 |                    |                | <b>**</b>   |              |               |                |        |
| Arm Guide                       |                        |               |             |                     |                  |                 |                    |                |             |              |               |                |        |
|                                 |                        |               |             |                     | <u>Location</u>  | <u>Loc Qty</u>  | <u>Loc Code</u>    |                |             |              |               |                |        |
|                                 |                        |               |             |                     | WA002            | 9               |                    |                |             |              |               |                |        |
|                                 |                        |               |             |                     | 137072           | 9               |                    |                |             |              |               |                |        |

16-04-25  
JBL

16-04-25  
JBL

16-04-25  
JBL

16-04-25  
JBL

# Picklist Print

Page 2

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Work Order ID: 144457

**\*144457\***

Parent Item: D3589-041

**\*D3589-041\***

Parent Item Name: Latch Assembly

Start Date: 4/20/2016

Required Date: 5/6/2016

Start Qty: 4.00

Required Qty: 4.00

D3589-7      Manufactured      No      100      Each      8.0000      1      4

**\*D3589-7\***

Aft Guide Plate

**\*\***

16-04-25  
JSC

Location

Loc Qty

Loc Code

WA002

8

139504

8

4

D3589-9      Manufactured      No      100      Each      4.0000      1      4

**\*D3589-9\***

Fwd Guide Plate

**\*\***

16-04-25  
JSC

Location

Loc Qty

Loc Code

WA002

4

139523

4

4

D3589-15      Manufactured      No      130      Each      39.0000      2      8

**\*D3589-15\***

Link

**\*\***

FF

Location

Loc Qty

Loc Code

WA002

39

137716

39

8

D3589-3      Manufactured      No      130      Each      5.0000      2      8

**\*D3589-3\***

Arm Guide

**\*\***

16-04-25  
JSC

Location

Loc Qty

Loc Code

WA002

5

137633

5

3  
5



# Picklist Print

April 18, 2016 3:08:11 PM

Page 3

Work Order ID: 144457

**\*144457\***

Parent Item: D3589-041

**\*D3589-041\***

Parent Item Name: Latch Assembly

Start Date: 4/20/2016

Required Date: 5/6/2016

Start Qty: 4.00

Required Qty: 4.00

MS20392-1C7

Purchased

No

130

Each

108.0000

2

8

**\*MS20392-1C7\***

Pin

**\*\***

DAS  
30  
9-89

APR 26 2016

Location

Loc Qty

Loc Code

ST314

108

m128976

8

m134488

100

8

MS24665-1010

Purchased

No

130

Each

216.0000

2

8

**\*MS24665-1010\***

COTTER PIN

**\*\***

DAS  
30  
9-89

APR 26 2016

Location

Loc Qty

Loc Code

ST288

216

108335

200

114405

16

8

NAS1149DN432J

Purchased

No

130

Each

165.0000

4

16

**\*NAS1149DN432.J\***

WASHER

**\*\***

DAS  
30  
9-89

APR 26 2016

Location

Loc Qty

Loc Code

CA

165

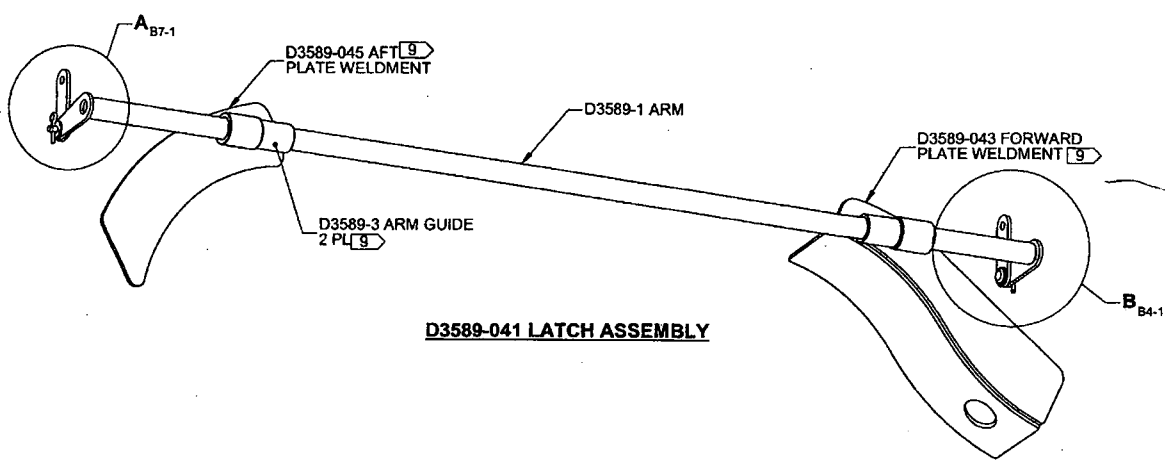
m129682

165

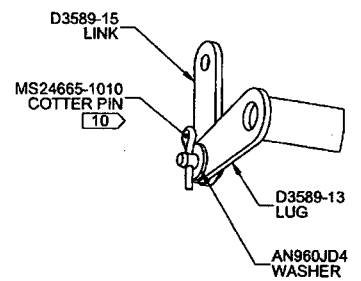
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16

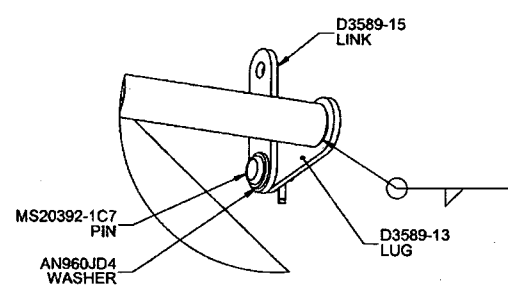
AW 9605 D4



| ITEM | QTY  | P/N          | DESCRIPTION            |
|------|------|--------------|------------------------|
|      | -041 |              |                        |
|      | X    | D3589-041    | LATCH ASSEMBLY         |
| 1    | 1    | D3589-043    | FORWARD PLATE WELDMENT |
| 2    | 1    | D3589-045    | AFT PLATE WELDMENT     |
| 3    | 1    | D3589-1      | ARM                    |
| 4    | 2    | D3589-3      | ARM GUIDE              |
| 5    | 2    | D3589-13     | LUG                    |
| 6    | 2    | D3589-15     | LINK                   |
| 7    | 4    | AN960JD4     | WASHER                 |
| 8    | 2    | MS20392-1C7  | PIN                    |
| 9    | 2    | MS24665-1010 | COTTER PIN             |



**DETAIL A: LINK ASSEMBLY DETAIL** 08-1  
SCALE 2X  
2 PL



**DETAIL B: WELDING AND LINK ASSEMBLY DETAIL** C3-1  
SCALE 2X  
2 PL

20160418 RELEASED  
2012-07-16

84 144457

|            |                                                                                                                                                                                                                                                                                             |    |          |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----------|
| C          | REVISED D3589-5: 2.75 WAS 3.00 (ZN B6-4); ADDED D3589-21 (ZN B3-4); AFFECTS D3589-047 (ZN A7-3) AND D3589-049 (ZN A3-3). REVISED D3589-15: Ø 0.140 WAS Ø 0.129 (ZN B4-7); 0.800 WAS 1.150 (ZN C4-7); ADDED D3589-23 (ZN C3-4); AFFECTS D3589-043-045 (ZN D7-2 AND D2-2). REASON: PAR12-177. | MB | 12.07.04 |
| B          | 0.80 AND 0.83 REF WERE 1.97 AND 0.80 (ZN C5-2); 0.50 WAS 1.89 (ZN C2-2); 0.75 REF REPLACES 2.01 (ZN C2-2); 28" WAS 15" (ZN B2-2); 18.00 WAS 18.88 (ZN D4-4); REDESIGNED D3589-9 (ZN A8-6) AND D3589-11F (ZN C2-3) REASON: REDESIGN FOR PROPER FIT AND TO MATCH TESTED CONFIGURATION         | MB | 08.08.25 |
| A          | NEW ISSUE                                                                                                                                                                                                                                                                                   | MB | 08.05.29 |
| REV.       | DESCRIPTION                                                                                                                                                                                                                                                                                 | BY | DATE     |
| DESIGN     |                                                                                                                                                                                                                                                                                             |    |          |
| DRAWN      |                                                                                                                                                                                                                                                                                             |    |          |
| CHECKED    |                                                                                                                                                                                                                                                                                             |    |          |
| MFG. APPR. |                                                                                                                                                                                                                                                                                             |    |          |
| APPROVED   |                                                                                                                                                                                                                                                                                             |    |          |
| DE APPR.   |                                                                                                                                                                                                                                                                                             |    |          |
| DATE       | 12.07.04                                                                                                                                                                                                                                                                                    |    |          |

- D3589-041 NOTES:**
- 1) MATERIAL: N/A
  - 2) FINISH: NONE
  - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
  - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
  - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
  - 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3589-041" AND B/N "BXXXXX" PER DART QSI 044 6.1 (FINE POINT PAINT MARKER)
  - 7) WEIGHT: 0.75 lbs
  - 8) WELDING: PER DART QSI 004 USING DT9033
  - 9) IDENTIFIED PARTS ARE LOOSE ON D3589-1 ARM
  - 10) INSTALL COTTER PIN IN ACCORDANCE WITH MS33540

**DART AEROSPACE LTD**  
HAWKESBURY, ONTARIO, CANADA

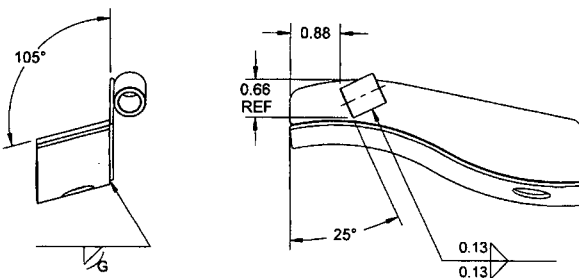
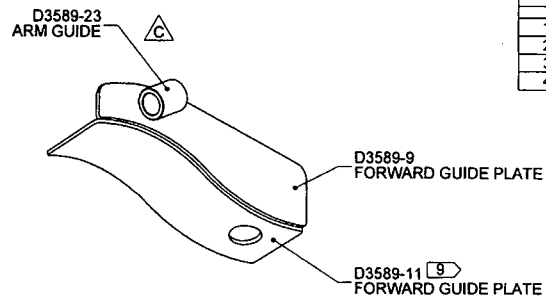
DRAWING NO. **D3589** REV. C  
SHEET 1 OF 8

TITLE **LATCH ASSEMBLY** SCALE NTS

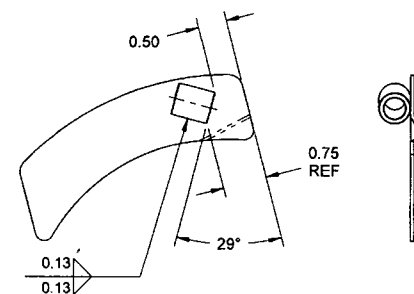
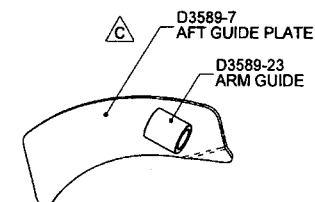
DATE **12.07.04**

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| ITEM | QTY<br>-043 | QTY<br>-045 | P/N       | DESCRIPTION            |
|------|-------------|-------------|-----------|------------------------|
|      | X           |             | D3589-043 | FORWARD PLATE WELDMENT |
|      |             | X           | D3589-045 | AFT PLATE WELDMENT     |
| 1    |             | 1           | D3589-7   | AFT GUIDE PLATE        |
| 2    | 1           |             | D3589-9   | FORWARD GUIDE PLATE    |
| 3    | 1           |             | D3589-11  | FORWARD GUIDE PLATE    |
| 4    | 1           | 1           | D3589-23  | ARM GUIDE              |



**D3589-043 FORWARD PLATE WELDMENT**



**D3589-045 AFT PLATE WELDMENT**

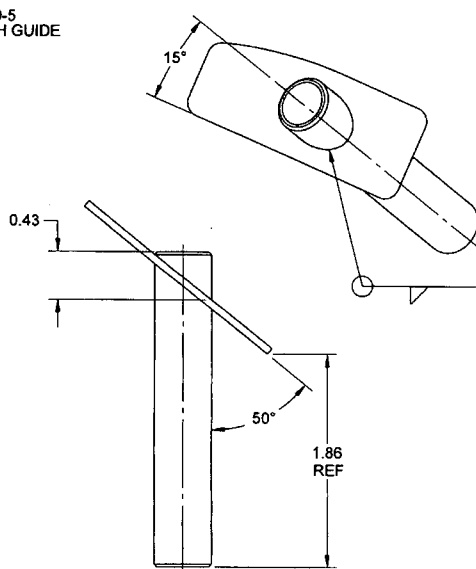
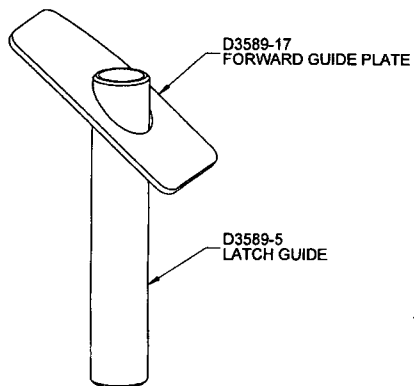
**RELEASED**  
2012-07-16

**D3589-043/-045 NOTES:**

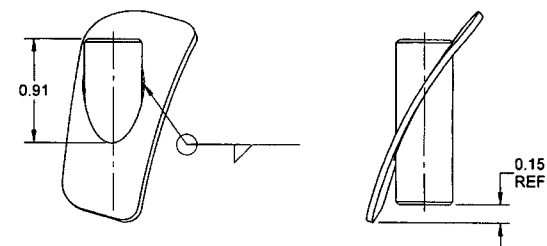
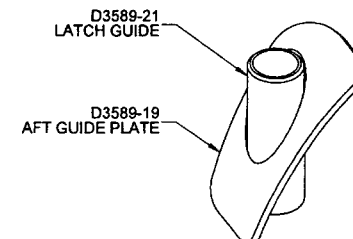
- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT:
  - D3589-043 = 0.23 lbs
  - D3589-045 = 0.10 lbs
- 8) WELDING: PER DART QSI 004 USING DT9033
- 9) FORM D3589-11 TO FIT D3589-9 MATING EDGE

|            |          |                                                                                                                                                                                                                                                                          |              |
|------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     |          | <b>DART AEROSPACE LTD</b>                                                                                                                                                                                                                                                |              |
| DRAWN      |          | HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                              |              |
| CHECKED    |          | DRAWING NO. <b>D3589</b>                                                                                                                                                                                                                                                 | REV. C       |
| MFG. APPR. |          |                                                                                                                                                                                                                                                                          | SHEET 2 OF 8 |
| APPROVED   |          | TITLE <b>LATCH ASSEMBLY</b>                                                                                                                                                                                                                                              | SCALE        |
| DE APPR.   |          |                                                                                                                                                                                                                                                                          | NTS          |
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| ITEM | QTY<br>-047 | QTY<br>-049 | P/N       | DESCRIPTION         |
|------|-------------|-------------|-----------|---------------------|
|      | X           |             | D3589-047 | FORWARD GUIDE       |
|      |             | X           | D3589-049 | AFT GUIDE           |
| 1    | 1           |             | D3589-5   | LATCH GUIDE         |
| 2    | 1           |             | D3589-17  | FORWARD GUIDE PLATE |
| 3    |             | 1           | D3589-19  | AFT GUIDE PLATE     |
| 4    |             | 1           | D3589-21  | LATCH GUIDE         |



**D3589-047 FORWARD GUIDE**



**D3589-049 AFT GUIDE**

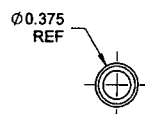
**D3589-047/-049 NOTES:**

- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: NONE
- 7) WEIGHT:
  - D3589-047 = 0.08 lbs
  - D3589-049 = 0.05 lbs
- 8) WELDING: PER DART QSI 004

**RELEASED**  
2012-07-16

|            |          |                                                                                                                                                                                                                                                                         |              |
|------------|----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     |          | <b>DART AEROSPACE LTD</b>                                                                                                                                                                                                                                               |              |
| DRAWN      |          | HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                             |              |
| CHECKED    |          | DRAWING NO. <b>D3589</b>                                                                                                                                                                                                                                                | REV. C       |
| MFG. APPR. |          |                                                                                                                                                                                                                                                                         | SHEET 3 OF 8 |
| APPROVED   |          | TITLE <b>LATCH ASSEMBLY</b>                                                                                                                                                                                                                                             | SCALE        |
| DE APPR.   |          |                                                                                                                                                                                                                                                                         | NTS          |
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8 7 6 5 4 3 2 1

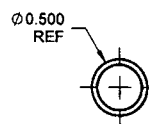


0.03 X 45°  
CHAMFER  
2 PL

0.065  
REF

19.00

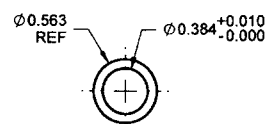
**D3589-1 ARM**



0.058  
REF

0.65

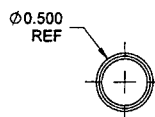
**D3589-3 ARM GUIDE**



0.090  
REF

0.65

**D3589-23 ARM GUIDE**

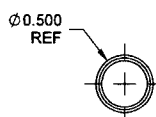


0.03 X 45°  
CHAMFER  
2 PL

0.049  
REF

2.75

**D3589-5 LATCH GUIDE**



0.03 X 45°  
CHAMFER  
2 PL

0.049  
REF

1.44

**D3589-21 LATCH GUIDE**

**D3589-1/-3/-5/-21/-23 NOTES:**

- 1) MATERIAL: AISI 304/316 STAINLESS STEEL SEAMLESS ROUND TUBING  
D3589-1: 0.375 O.D. X 0.065 WALL (REF. DART SPEC M304TR0.375W.065)  
D3589-3: 0.500 O.D. X 0.058 WALL (REF. DART SPEC M304TR0.500W.058)  
D3589-5/-21: 0.500 O.D. X 0.049 WALL (REF. DART SPEC M304TR0.500W.049)  
D3589-23: AISI 304/316 STAINLESS STEEL ROUND BAR PER ASTM A276  
(REF. DART SPEC M304R)

2) FINISH: NONE

3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED

4) UNITS: INCHES UNLESS OTHERWISE NOTED

5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX

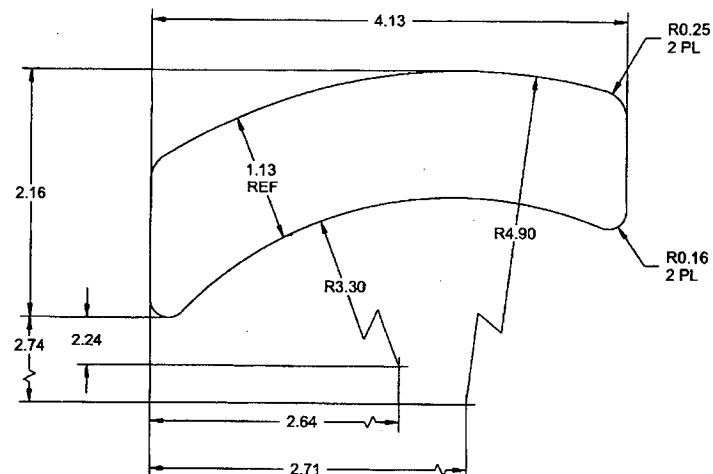
6) IDENTIFICATION: N/A

- 7) WEIGHT: - D3589-1 = 0.34 lbs  
- D3589-3 = 0.01 lbs  
- D3589-5 = 0.06 lbs  
- D3589-21 = 0.03 lbs  
- D3589-23 = 0.02 lbs

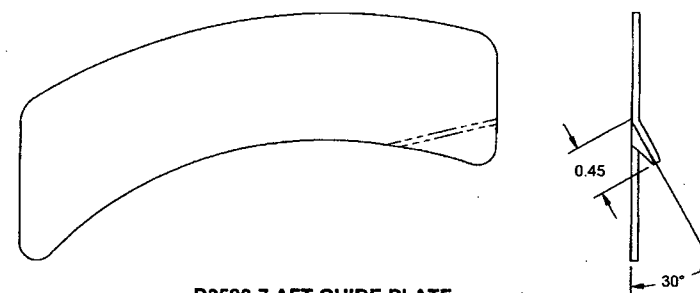
**RELEASE**  
2012-07-16

|                                                                                                                                                                                                                                        |                                                                                       |                                        |              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|----------------------------------------|--------------|
| DESIGN                                                                                                                                                                                                                                 |  | <b>DART AEROSPACE LTD</b>              |              |
| DRAWN                                                                                                                                                                                                                                  |  | HAWKESBURY, ONTARIO, CANADA            |              |
| CHECKED                                                                                                                                                                                                                                |  | DRAWING NO.                            | REV. C       |
| MFG. APPR.                                                                                                                                                                                                                             |  | D3589                                  | SHEET 4 OF 8 |
| APPROVED                                                                                                                                                                                                                               |  | TITLE                                  | SCALE        |
| DE APPR.                                                                                                                                                                                                                               |  | LATCH ASSEMBLY                         | NTS          |
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8 7 6 5 4 3 2 1



**D3589-7F AFT GUIDE PLATE  
FLAT PATTERN**



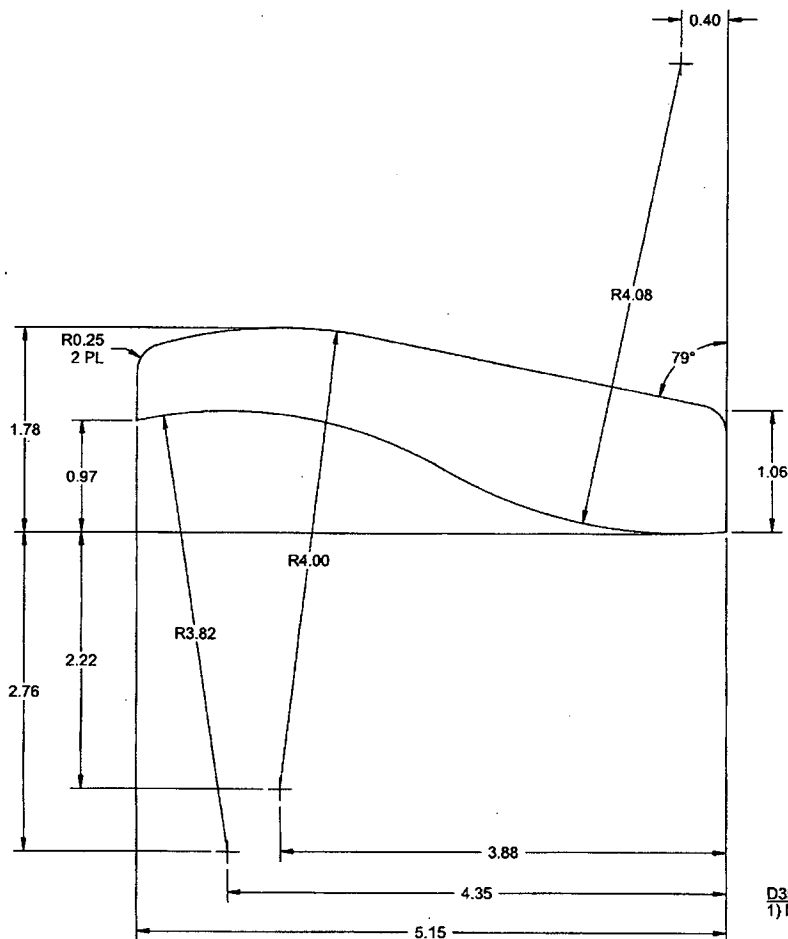
**D3589-7 AFT GUIDE PLATE**  
MAKE FROM D3589-7F

**RELEASED**  
2012-07-16

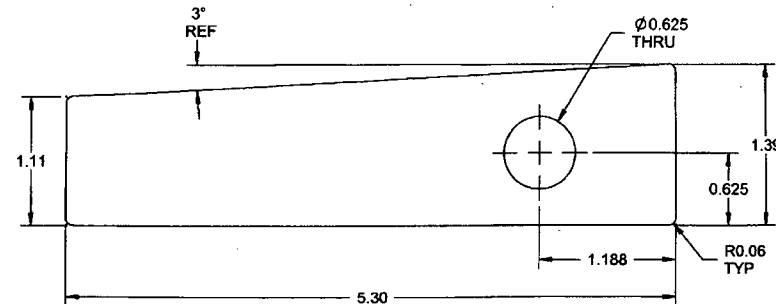
**D3589-7F NOTES:**

- 1) MATERIAL: AISI 304/316 STAINLESS STEEL SHEET, PER AMS 5513 OR AMS 5524, OR MIL-S-5059 (ANNEALED) 2B FINISH  
16 GAUGE (0.063 THICK), (REF. DART SPEC M304S16GA)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 0.09 lbs

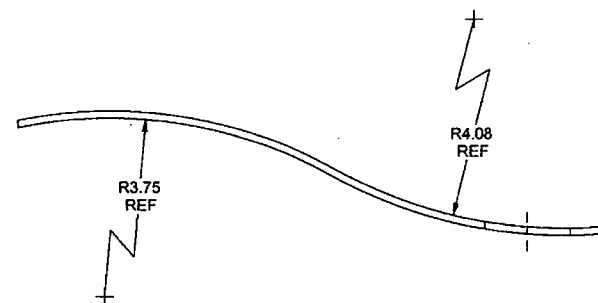
|            |                 |                                                                                                                                                                                                                                                                                                  |        |
|------------|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| DESIGN     |                 | <b>DART AEROSPACE LTD</b>                                                                                                                                                                                                                                                                        |        |
| DRAWN      |                 | HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                                                      |        |
| CHECKED    |                 | DRAWING NO. <b>D3589</b>                                                                                                                                                                                                                                                                         | REV. C |
| MFG. APPR. |                 | SHEET 5 OF 8                                                                                                                                                                                                                                                                                     |        |
| APPROVED   |                 | TITLE                                                                                                                                                                                                                                                                                            | SCALE  |
| DE APPR.   |                 | <b>LATCH ASSEMBLY</b>                                                                                                                                                                                                                                                                            | NTS    |
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**D3589-9 FORWARD GUIDE PLATE**



**D3589-11F FORWARD GUIDE PLATE  
FLAT PATTERN**



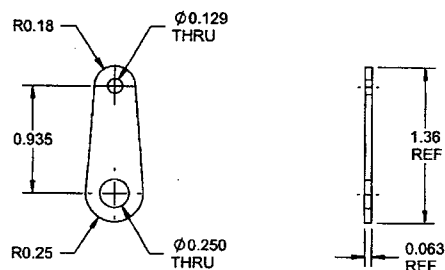
**D3589-11 FORWARD GUIDE PLATE  
(MAKE FROM D3589-11F)**

**D3589-9/-11/-11F NOTES:**

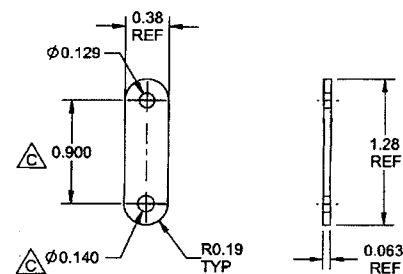
- 1) MATERIAL: AISI 304/316 STAINLESS STEEL SHEET,  
PER AMS 5513 OR AMS 5524,  
OR MIL-S-5059 (ANNEALED) 2B FINISH  
18 GAUGE (0.063 THICK),  
(REF. DART SPEC M304S16GA)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS  
OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 0.09 lbs EACH
- 8) CONTROL SHAPE PER DT9021 TEMPLATE

**RELEASED**  
2012-07-16

|                                                                                                                                                                                                                                            |                 |                                        |              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------------------|--------------|
| DESIGN                                                                                                                                                                                                                                     |                 | <b>DART AEROSPACE LTD</b>              |              |
| DRAWN                                                                                                                                                                                                                                      |                 | HAWKESBURY, ONTARIO, CANADA            |              |
| CHECKED                                                                                                                                                                                                                                    |                 | DRAWING NO.                            | REV. C       |
| MFG. APPR.                                                                                                                                                                                                                                 |                 | <b>D3589</b>                           | SHEET 6 OF 8 |
| APPROVED                                                                                                                                                                                                                                   |                 | TITLE                                  | SCALE        |
| DE APPR.                                                                                                                                                                                                                                   |                 | <b>LATCH ASSEMBLY</b>                  | NTS          |
| DATE                                                                                                                                                                                                                                       | <b>12.07.04</b> | COPYRIGHT © 2008 BY DART AEROSPACE LTD |              |
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**D3589-13 LUG**



**D3589-15 LINK**

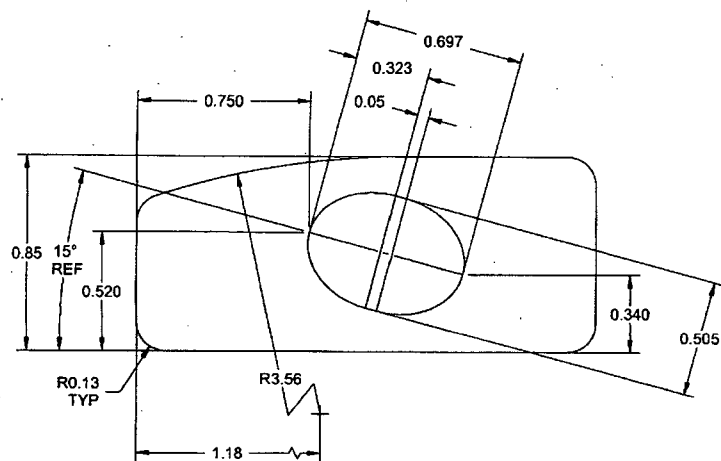
**RELEASED**  
2012-07-16  
WD

**D3589-13/15 NOTES:**

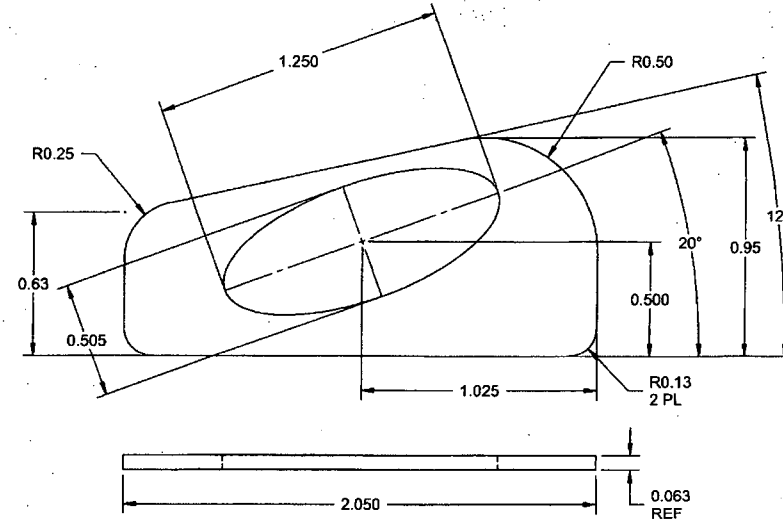
- 1) MATERIAL: AISI 304/316 STAINLESS STEEL SHEET, PER AMS 5513 OR AMS 5524, OR MIL-S-5059 (ANNEALED) 2B FINISH  
16 GAUGE (0.063 THICK), (REF. DART SPEC M304S16GA)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 0.01 lbs EACH

|            |          |                                                                                                                                                                                                                                                                                          |              |
|------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     |          | <b>DART AEROSPACE LTD</b>                                                                                                                                                                                                                                                                |              |
| DRAWN      |          | HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                                              |              |
| CHECKED    |          | DRAWING NO.                                                                                                                                                                                                                                                                              | REV. C       |
| MFG. APPR. |          | D3589                                                                                                                                                                                                                                                                                    | SHEET 7 OF 8 |
| APPROVED   |          | TITLE                                                                                                                                                                                                                                                                                    | SCALE        |
| DE APPR.   |          | LATCH ASSEMBLY                                                                                                                                                                                                                                                                           | NTS          |
| DATE       | 12.07.04 | <small>COPYRIGHT © 2006 BY DART AEROSPACE LTD<br/>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> |              |

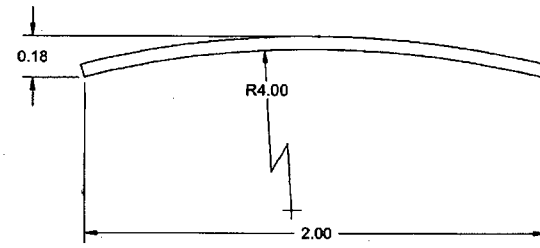




**D3589-17 FORWARD GUIDE PLATE**



**D3589-19F AFT GUIDE PLATE FLAT PATTERN**



**D3589-19 AFT GUIDE PLATE**  
(MAKE FROM D3589-19F)

**RELEASED**  
2012-07-16

**D3589-17/-19/-19F NOTES:**

- 1) MATERIAL: AISI 304/316 STAINLESS STEEL SHEET, PER AMS 5513 OR AMS 5524, OR MIL-S-5059 (ANNEALED) 2B FINISH  
16 GAUGE (0.063 THICK), (REF. DART SPEC M304S16GA)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 0.02 lbs EACH

|            |                 |                                                                                                                                                                                                                                                                                         |              |
|------------|-----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| DESIGN     |                 | <b>DART AEROSPACE LTD</b>                                                                                                                                                                                                                                                               |              |
| DRAWN      |                 | HAWKESBURY, ONTARIO, CANADA                                                                                                                                                                                                                                                             |              |
| CHECKED    |                 | DRAWING NO.                                                                                                                                                                                                                                                                             | REV. C       |
| MFG. APPR. |                 | <b>D3589</b>                                                                                                                                                                                                                                                                            | SHEET 8 OF 8 |
| APPROVED   |                 | TITLE                                                                                                                                                                                                                                                                                   | SCALE        |
| DE APPR.   |                 | <b>LATCH ASSEMBLY</b>                                                                                                                                                                                                                                                                   | NTS          |
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